Instructions to Complete Live Poultry Dealer Inquiry Form P&SP-1500

This form is used by each individual, corporation, or association engaged in business as a poultry dealer and is required by Section 201.94 and section 201.100 of the regulations under the Packers and Stockyards Act, 1921, as amended and supplemented.

Mail the completed form to the regional office of the Packers and Stockyards Programs that covers your state. The states covered by each regional office are listed below the regional office's address.

Regional Offices of the Packers and Stockyards Programs Grain Inspection, Packers and Stockyards Administration			
Atlanta Regional Office	Denver Regional Office	Des Moines Regional Office	
Suite 230	One Gateway Centre	Room 317	
75 Spring Street	3950 Lewiston St., Suite 200	210 Walnut Street	
Atlanta, GA 30303-3308	Aurora, CO 80011-1556	Des Moines, IA 50309-2110	
Telephone: (404) 562-5840	Telephone: (303) 375-4240	Telephone: (515) 323-2579	
FAX: (404) 562-5848	FAX: (303) 371-4609	FAX: (515) 323-2590	
e-mail:	e-mail:	e-mail:	
PSPAtlantaGA.GIPSA@usda.gov	PSPDenverCO.GIPSA@usda.gov	PSPDesMoinesIA.GIPSA@usda.gov	
States Covered	States Covered	States Covered	
AL, AR, CT, DC, DE, FL, GA, LA,	AK, AZ, CA, CO, HI, ID, KS, MT,	IA, IL, IN, KY, OH, MI, MO, MN,	
MA, MD, ME, MS, NC, NH, NJ,	NE, NM, NV, OK, OR, TX, UT,	ND, SD, WI	
NY, PA, RI, SC, TN, VA, VT, WV	WA, WY		

Additional copies of the report may be obtained from the regional office covering your state. All inquiries concerning any section or part of a section contained in the report can also be addressed to that regional office.

Line No.	Subject	Instructions	
Section 1-General Information			
1	Name and Address	Enter the name and street, city, state, and zip code of the poultry firm. If you are completing the form as an individual, list your personal name and mailing address.	
2	Type of Organization	Check the appropriate box to indicate the type of organization as it applies to the business's operation.	
3a through 3c	Phone, Fax, Cell Phone Numbers	Enter the firm's telephone number(s), fax number(s), and the cell phone number(s) of the owner(s) of the firm.	
4	E-mail Address	Enter the e-mail address of the firm or of one of its owners.	
5	State Formed, Date Formed	If the type of firm is not "individual," enter the state where the organization was formed and the date that it was formed.	
6	Fiscal Year	If the firm operates on a fiscal year enter the end month and day for the fiscal year for which the report is providing information.	
7a through 7d	Name and Address of Owners, Officers, Directors, and/or Partners	For each owner and every partner, enter their name, title, respective percentage of ownership, social security number, and their personal mailing address (street, city, state, and 9 digit zip code). Provide this information for every individual with any ownership interest in the applicant's operation.	
		For every officer and each director, enter their name, title, social security number, and their personal mailing address (street, city, state, and 9 digit zip code).	
		Providing the social security number is optional. The sole use of the social security number(s) sought on the form is to distinguish between applicants and registrants that have identical or similar names.	
Section 2 – Description Of Business			
8	The poultry firm is a	Check the appropriate box to indicate what activities within the poultry business your firm conducts.	

Line No.	Subject	Instructions		
Section 3 – Live Poultry Purchases				
9a	Did the firm purchase	Check the appropriate box(es) to indicate if the firm purchased live poultry		
and	live poultry for	for slaughter in the past year. If you check "Yes," write the FSIS		
9b	slaughter?	establishment number on line number 9b.		
10	Did firm purchase	Check the appropriate box to indicate if the firm purchased live poultry to		
	live poultry to sell to	sell to another firm that slaughters.		
	a firm that			
1.1	slaughters?			
11	Did the firm's	Check the appropriate box to indicate if the firm's purchases originated		
	purchases originate outside of the state in	outside of the state in which it was slaughtered.		
12	which slaughtered? Total cost of live	Enter the total cost of all poultry purchased for the firm's account for the		
12	poultry purchased for	past year.		
	firm's account in a	past year.		
	year			
	1 2	ve Poultry Produced Under Growing Arrangements		
13	Did firm obtain	Check the appropriate box to indicate if the firm obtained poultry using a		
	poultry using a	growing arrangement for the poultry's own slaughter.		
	growing arrangement	San		
	for it's own slaughter			
14	Did firm sell or	Check the appropriate box to indicate if the firm sold or purchased poultry		
	contract poultry	obtained using a growing arrangement.		
	obtained using a			
	growing arrangement			
15	Did poultry obtained	Check the appropriate box to indicate if the poultry obtained by the firm		
	originate outside of	originated outside of the state in which the poultry was slaughtered.		
	the state in which			
	slaughtered			
16	Growers with	Enter the number of growers with growing arrangements. Enter the names		
	growing	of growers with growing arrangements. List the names of the growers in the		
17	arrangements	space provided under Section 7.		
17	Estimated yearly	Enter the estimated yearly dollar value of poultry obtained under growing		
	value of the poultry obtained under	arrangements.		
	growing			
	arrangements			
	urrungements	Section 5-Poultry Product Sales		
18	Did the firm sell or	Check the appropriate box to indicate if poultry products your firm		
	ship any poultry	manufactures or prepares are sold or shipped to another state.		
	products			
	manufactured or			
	prepared by it outside			
	the state for slaughter			
19	Did the firm sell or	Check the appropriate box to indicate if poultry products your firm		
	ship any poultry	manufactures or prepares are sold or shipped to the U.S. Government.		
	products			
	manufactured or			
	prepared by it to the			
	U.S. Government	Scotion (Doubton Duodnot Sold		
20	Total Sales	Section 6 – Poultry Product Sold Enter the total color of newless are diversed and by products cold during the less		
20	Total Sales	Enter the total sales of poultry products and by-products sold during the last		
fiscal year. Section 7-Remarks				
21	Remarks	Enter additional information or provide explanations for any numbered items		
21	Romanas	above. Include the list of names of growers with growing arrangements.		
22	Signature	An owner or officer of the firm must sign line number 22.		
23	Title	Enter the official title of the person signing.		
24	Date	Enter the date that the form was signed.		
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